

See below.

This guy is way out of his depth in understanding EMR and how things get done.

Much of the same stuff we put in the Prep document 2 weeks ago (attached).

The first 2 are so overly broad we would never have enough money to meet the demand.

(b) (6)

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**From:** (b) (6)  
**Sent:** Monday, November 27, 2017 12:05  
**To:** (b) (6) <(b) (6)@cerner.com>; (b) (6) <(b) (6)@Cerner.com>; (b) (6) <(b) (6)@CERNER.COM>  
**Cc:** (b) (6) <(b) (6)@Cerner.com>; (b) (6) <(b) (6)@CERNER.COM>  
**Subject:** FW: follow-up

Close Hold.....can you please just do a quick couple sentence answer for below?

This is the Dr from W Palm that is connected to Trump and he reached out with some follow-up items. I believe he is outdated in his understanding of system but we need to be responsive here.

(b) (6)

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**From:** Windom, John H. [mailto:(b) (6)@va.gov]  
**Sent:** Monday, November 27, 2017 11:38 AM  
**To:** (b) (6) <(b) (6)@CERNER.COM>  
**Subject:** follow-up

Begin forwarded message:

**Subject: Re: [EXTERNAL] Follow up meeting**

Prior to any meeting we need to know what is not in the contract so we can make progress:

Cerner Contract has to have the responsibility of 100% connectivity to all EMR platforms for Choice to work

(b) (6)

Should be stipulation that Choice provider have MU CEHRT to allow for communication. I am pretty sure this is way outside the price point we have defined. We would need to have the office of interoperability and team on the ground to help make the connections. There is still no, to my knowledge, requirement for Choice providers to provide anything back to the VA.

Cerner has to have telemedicine built into the system